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effects for wave, group, wave*group, education, race/ethnicity, and income-assessed adjusted average intake and within-group changes from baseline ($\alpha = 0.05$).

Results: Baseline total FV intake averaged 2.81 times/day (Controls), 2.80 (HB), and 2.63 (Stellar). At Wave 2, all groups had non-significant increases (Controls: 0.04, $P = .734$; HB: 0.22, $P = .088$; Stellar: 0.28, $P = .114$). At Wave 3, Controls and HB had non-significant changes from baseline by -0.22 ($P = .131$) and -0.27 ($P = .054$), respectively, while Stellar significantly increased by 0.41 times/day ($P = .041$).

Conclusions: These findings indicate that Stellar programming, which includes HB, may support sustained increased FV consumption more than HB distribution alone. This study is limited by unexpectedly small sample sizes and seasonal variation between survey waves.

Funding: Centers for Disease Control and Prevention.

P72 Examining Perceptions of Obesity-Related Training Opportunities and Needs for Head Start Health/Nutrition Managers

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Background: Head Start (HS) health/nutrition managers have identified obesity as the top health concern for their preschool children. However, little information exists related to perceived training needs and professional development (PD) training opportunities available for HS managers around obesity and related measurements.

Objective: To examine perceptions of obesity-related PD training needs and opportunities reported by Ohio Head Start health/nutrition program managers.

Study Design, Setting, Participants: Phenomenology was utilized for this research study. Semi-structured, in-depth telephone interviews ($n = 13$) were conducted with HS Health and Nutrition Managers across Ohio who were recruited via emails distributed by the HS Director of Professional Development.

Outcome Measure/Analysis: Interviews were audio-recorded and transcribed. Open coding of transcripts was conducted by trained qualitative researchers. Significant statements were coded, defined, and organized into themes. Themes enabled the description of the types of opportunities and needs (the “what” and “how”) of the phenomenon.

Results: Researchers identified 5 themes. Themes around professional development opportunities included attending professional health conferences (eg nursing/nutrition/early childhood/health) as part of the professional continuing education requirements; online food and nutrition-focused trainings (eg, webinars) through state and national resources, such as USDA; health-related trainings as part of professional development days organized by

Head Start programs; and networking as informal education from internal staff, RD consultants, and partnerships with local universities and WIC. Participants identified a lack of knowledge and training specific to the understanding of BMI, BMI-for-age growth charts, and skills around BMI measurement.

Conclusions: There are a number of general nutrition, food, and health-related trainings from a variety of sources (professional organizations, USDA, Head Start), but there is a need identified for training to improve knowledge and skills specific to BMI and its measurement (height/weight) in preschoolers, and the interpretation of BMI-for-age growth charts.

Funding: Miami University College of Education, Health & Society.

Nutrition Education Research Methods

P73 Dietetics Experiential Learning at Diabetes Camp: Findings through Photovoice & Qualitative Analysis

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Background: Experiential learning provides an opportunity for students to develop hands-on experience and apply didactic learning to real-life situations. Diabetes camp is a setting that provides experiential learning on a topic that is crucial for future dietitians.

Objective: The objective of this study was to explore whether and how educational experiences at a residential camp for children with type 1 diabetes changes knowledge, perceptions, confidence, and empathy of the disease for dietetics students. Qualitative research methods were used to explore and understand participants' experience of hands-on involvement with type one diabetes.

Study Design, Setting, Participants: This study was a qualitative, 2-year longitudinal case study at Camp Kno-Koma, the Diabetes Camp of West Virginia. Four dietetic students were recruited to participate in this study through convenience sampling. Students were in varying stages of their dietetics education.

Measurable Outcome/Analysis: Multiple qualitative methods were used to collect data: interviews; observations; Photovoice, a type of participatory action research in which photographs identified significant learning experiences; journaling; and focus groups. Thematic analysis was used to identify emerging themes and summarize findings through triangulation.

Results: Qualitative data analysis revealed that experiential learning at diabetes camp provides an opportunity for dietetics students to experience in-depth learning, including: increase in knowledge of the disease, perceptions of living with the disease, confidence in treating the disease, and empathy for those who have been diagnosed. While attending camp for one week is beneficial for experiential learning, returning for another week the following year

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provided a deeper understanding of the disease process. Students identified wearing an insulin pump and “living with diabetes” were their best learning experiences.

Conclusions: This study adds to the limited body of knowledge concerning dietetics students’ experiential learning at diabetes camps. The study’s greatest contribution is the ability for educators to understand how experiential learning opportunities at diabetes camp provide in-depth education and how these learning experiences can be incorporated into dietetics curricula.

Funding: None.

Nutrition Education Program Design Implementation and Evaluation

P74 A Community-Based Intervention Reduces Diabetes Risk in a Low-Income Community

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Objective: Promote diabetes prevention in a low-income community by offering Cooking Matters (CM) in coordination with the Diabetes Prevention Program (DPP).

Use of Theory or Research: Reducing food insecurity is important for reducing chronic disease rates. DPP is a validated and effective intervention that reduces progression to type 2 diabetes. However, there is an outcome disparity for DPP in low-income communities. Our research aims to improve DPP outcomes in low-income communities.

Target Audience: Pre-diabetic participants ≥ 18 years old in low-income communities in Detroit, Michigan.

Program Description: This study represents partnerships between Gleaners Community Food Bank (GCFB), National Kidney Foundation of Michigan (NKFM), and Wayne State University. DPP, administered by NKFM, is a community-based intervention that significantly reduces diabetes risk. CM, locally administered through GCFB, is another effective community program that teaches food skills, and provides food provisions. We hypothesize that combining DPP and CM in a low-income setting will improve program completion, and thereby reduce the risks for progressing to type 2 diabetes.

Evaluation Methods: Over 12 months, low-income individuals participated in the study. Demographics were collected at the onset of the study. Survey information was collected for diet and physical activity at 4 time-points throughout the study. Body weight was collected at every session, and HbA1C was collected at the onset and conclusion of the program.

Results: Combining DPP and CM resulted in a 79% completion rate, compared to the $<50\%$ completion rate observed for DPP alone in low-income communities. Mean HbA1C dropped 10.6% (paired t-test, $P < .01$), from pre-diabetic to normal levels, and every participant demonstrated lower post-test HbA1C values. Participants experienced a mean weight loss of 7.6% (paired t-test, $P < .01$), and $>75\%$ of participants exceeded 5% weight loss at 12 months.

Conclusions: Combining DPP and CM is effective at reducing diabetes risk in low-income communities. Food bank services, which already serve low-income vulnerable communities, can be coupled to existing chronic illness prevention programs to improve disease risk in vulnerable populations.

Funding: Gleaners Community Food Bank of Southeastern Michigan.

Nutrition Education Research Methods

P75 Successes and Challenges of Using a Peer Mentor Model for Nutrition Education Within a Food Pantry: A Qualitative Study

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Background: Delivering nutrition education within an emergency food pantry (EFP) is a valuable and sustainable approach to target the food insecure and underserved populations. However, little is known about using a peer mentor model, “Community Cooks,” as a modality to deliver nutrition education within this setting.

Objective: This research aimed to identify the successes and challenges of using a peer mentor model within an EFP to better understand the best approaches to deliver nutrition education among community residents.

Study Design, Setting, Participants: In spring 2018, semi-structured interviews were conducted with 11 peer mentors after they delivered a series of nutrition workshops to community members of the EFP.

Measurable Outcome/Analysis: Interviews were audio-recorded and transcribed verbatim. Qualitative content analysis was used to analyze the data.

Results: All peer mentors were women over 40 years-of-age, recruited from the EFP community; most were high school graduates and received some form of federal nutrition assistance. All peer mentors reported that the “Community Cooks” nutrition education program offered many benefits. Key successes of the program included the

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